

Batch Description: DECEMBER 2017 INVOICES FOR BM

Processing Month: 12/2017

<b>Vendor ID: AMAZON</b>	<b>AMAZON</b>	<b>PO Number: 17-18-0043</b>	<b>Invoice Number: 20171207</b>	<b>Amount: 18.96</b>
Description: Need two more Algebra I textbooks.		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 1100 420 0	need two Algebra 1 textbooks		18.96	N Final
<b>Vendor ID: AMAZON</b>	<b>AMAZON</b>	<b>PO Number: 17-18-0034</b>	<b>Invoice Number: 20171207-0001</b>	<b>Amount: 169.00</b>
Description: Ordering for Bob Hunter		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2620 410 0	DEWALT DCBL720P1 20V MAX 5.0 Ah Lithium		169.00	N Final
<b>Vendor ID: AXIS</b>	<b>AXIS</b>	<b>PO Number:</b>	<b>Invoice Number: 2802</b>	<b>Amount: 47.10</b>
Description:		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2510 630 0	47.10		47.10	N
<b>Vendor ID: AXMAHEAT</b>	<b>AXMANN HEATING &amp; AIR</b>	<b>PO Number:</b>	<b>Invoice Number: 4299</b>	<b>Amount: 195.00</b>
Description: SERVICE		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2620 318 0	ART RM		195.00	N
<b>Vendor ID: AXMAHEAT</b>	<b>AXMANN HEATING &amp; AIR</b>	<b>PO Number:</b>	<b>Invoice Number: 4302</b>	<b>Amount: 126.00</b>
Description: SERVICE		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2620 318 0	BOILER		126.00	N
<b>Vendor ID: AXMAHEAT</b>	<b>AXMANN HEATING &amp; AIR</b>	<b>PO Number:</b>	<b>Invoice Number: 4303</b>	<b>Amount: 191.00</b>
Description: SERVICE		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2620 318 0	BEDNARS RM		191.00	N
<b>Vendor ID: AXMAHEAT</b>	<b>AXMANN HEATING &amp; AIR</b>	<b>PO Number:</b>	<b>Invoice Number: 4330</b>	<b>Amount: 412.00</b>
Description: SERVICE		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2620 318 0	BOILER 10-25		412.00	N
<b>Vendor ID: BLICART</b>	<b>BLICK ART MATERIALS</b>	<b>PO Number: 17-18-0035</b>	<b>Invoice Number: 20171207</b>	<b>Amount: 102.90</b>

**Invoice Listing - Detail**  
Unposted

Description: Art-canvas		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1110 410 0	4x4 canvas		7.46		N
01 1110 410 0	5x7 canvas		16.06		N
01 1110 410 0	8x10 canvas		18.56		N
01 1110 410 0	9x12 canvas		25.07		N
01 1110 410 0	11x14 canvas		35.75		N
<b>Vendor ID: BUFFCOUN</b>	<b>BUFFALO CO SHERIFF'S OFFICE</b>	<b>PO Number:</b>	<b>Invoice Number: DEC2017</b>	<b>Amount:</b>	<b>220.00</b>
Description: DARE FEES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2190 410 0	DARE SUPPLY		220.00		N
<b>Vendor ID: BUILWARE</b>	<b>BUILDERS WAREHOUSE</b>	<b>PO Number: 17-18-0039</b>	<b>Invoice Number: 20171207</b>	<b>Amount:</b>	<b>132.55</b>
Description:		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1140 490 0	4 x 8 15/32 osb		92.60		N
01 1140 490 0	ladder roof bracket		39.95		N
<b>Vendor ID: CENGLEAR</b>	<b>CENGAGE LEARNING</b>	<b>PO Number: 17-18-0040</b>	<b>Invoice Number: 62291217</b>	<b>Amount:</b>	<b>44.00</b>
Description: Accounting Access Card		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1100 420 0	Accounting access card		44.00		N
<b>Vendor ID: DANACOLE</b>	<b>DANA F. COLE &amp; COMPANY, LLP</b>	<b>PO Number:</b>	<b>Invoice Number: 3252610</b>	<b>Amount:</b>	<b>1,290.00</b>
Description: AUDITORS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 1,290.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2510 310 0	ACCT SERVICES		1,290.00	1,290.00	N
<b>Vendor ID: EAKEOFC</b>	<b>EAKES OFFICE SOLUTIONS</b>	<b>PO Number:</b>	<b>Invoice Number: 28331</b>	<b>Amount:</b>	<b>2,395.46</b>
Description: COPIER SUPPLY		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1100 410 0	COPIES		2,395.46		N
<b>Vendor ID: EGANSUPP</b>	<b>EGAN SUPPLY</b>	<b>PO Number:</b>	<b>Invoice Number: 274746</b>	<b>Amount:</b>	<b>126.80</b>
Description: SUPPLIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 410 0	ICE MELT		126.80		N

**Invoice Listing - Detail**  
Unposted

<b>Vendor ID: ESU10</b>	<b>ESU 10</b>	<b>PO Number:</b>	<b>Invoice Number: DEC_BILL_2017</b>	<b>Amount: 17,072.54</b>
Description: SERVICES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 1100 691 0	IPAD REPAIRS		310.00	N
01 4410 310 0	VOC. EVAL		411.78	N
01 2212 670 0	TRAINING		40.00	N
01 4410 313 0	DEAF ED. SA		186.42	N
01 4404 313 0	DEAF ED. 3-4'S		93.21	N
01 4410 313 0	PT SA		682.25	N
01 4404 313 0	PT 3-4S		214.42	N
01 4404 313 0	PT B-2S		77.97	N
01 4410 310 0	SUPER SA		1,547.44	N
01 4404 313 0	SUPER 3-4S		279.21	N
01 4410 313 0	OT SA		1,158.94	N
01 4404 313 0	OT 3-4S		220.05	N
01 4404 313 0	OT B-2S		88.02	N
01 4410 314 0	SPEECH SA		8,161.34	N
01 4404 314 0	SPEECH 3-4S		538.11	N
01 4404 314 0	SPEECH B-2S		269.06	N
01 4410 313 0	VISION SA		234.02	N
01 4410 313 0	PSYCH SA		2,463.74	N
01 4410 313 0	AUDIO SA		96.56	N

<b>Vendor ID: FLAGHOUSE</b>	<b>FLAGHOUSE</b>	<b>PO Number:</b>	<b>Invoice Number: V015909801017</b>	<b>Amount: 669.64</b>
Description: SPED SUPPLY		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 1200 410 0	REHAB STRAP WEDGE		669.64	N

<b>Vendor ID: HAPPPUBL</b>	<b>HAPP PUBLISHING</b>	<b>PO Number:</b>	<b>Invoice Number: OCT-NOV</b>	<b>Amount: 143.59</b>
Description: NEWSPAPERS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2510 350 0	OCT MINUTES		59.56	N
01 2510 350 0	NOV MIN.		58.03	N
01 2222 440 0	SUBS.		26.00	N

<b>Vendor ID: JAYMARBUS</b>	<b>JAYMAR BUSINESS FORMS</b>	<b>PO Number:</b>	<b>Invoice Number: 055010</b>	<b>Amount: 101.40</b>
Description: BUSINESS FORMS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A 1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u> <u>Asset/Asset Tag</u> <u>In Full</u>
01 2510 410 0	W2S, 1099S		101.40	N

<b>Vendor ID: JOSTENS</b>	<b>JOSTENS INC</b>	<b>PO Number:</b>	<b>Invoice Number: 20626621</b>	<b>Amount:</b>	<b>299.89</b>
Description: DIPLOMAS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2190 410 0	DIPLOMAS		299.89		N
<b>Vendor ID: LOCKMOBILE</b>	<b>LOCKMOBILE</b>	<b>PO Number:</b>	<b>Invoice Number: 69745</b>	<b>Amount:</b>	<b>150.00</b>
Description: SERVICES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2620 318 0	ELEC. STRIKE		150.00		N
<b>Vendor ID: LOUPVALL</b>	<b>LOUP VALLEY LIGHTING, INC</b>	<b>PO Number:</b>	<b>Invoice Number: 17-12290</b>	<b>Amount:</b>	<b>487.40</b>
Description: SUPPLIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 410 0	LIGHT BULBS		487.40		N
<b>Vendor ID: MCKISAND</b>	<b>MCKIRAHAN, SANDRA</b>	<b>PO Number: 17-18-0045</b>	<b>Invoice Number: 20171207</b>	<b>Amount:</b>	<b>100.00</b>
Description: fkc clinic		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1130 410 0	ACCOMPANYING		100.00		N
					Final
<b>Vendor ID: MENARDS</b>	<b>MENARDS</b>	<b>PO Number:</b>	<b>Invoice Number: 45990</b>	<b>Amount:</b>	<b>69.94</b>
Description: SUPPLIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 338 0	chords		69.94		N
<b>Vendor ID: MENARDS</b>	<b>MENARDS</b>	<b>PO Number:</b>	<b>Invoice Number: 46180</b>	<b>Amount:</b>	<b>45.52</b>
Description: SUPPLIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 410 0	cleaning supply		45.52		N
<b>Vendor ID: NEBRCOUN</b>	<b>NEBRASKA COUNCIL OF SCHOOL ADMINISTRATORS</b>	<b>PO Number:</b>	<b>Invoice Number: DEC2017</b>	<b>Amount:</b>	<b>115.00</b>
Description: MEMBERSHIPS/CONFERENCES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2320 670 0	LEG. PREVIEW		115.00		N
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29322</b>	<b>Amount:</b>	<b>370.57</b>
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00

**Invoice Listing - Detail**  
Unposted

Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 690 0	01 INSP		68.00		N	
01 2750 338 0	01 OIL CHG, REPA.		302.57		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29392</b>	<b>Amount:</b>	<b>548.98</b>	
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 690 0	08 BUS INSP		68.00		N	
01 2750 338 0	08 REP.		480.98		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29420</b>	<b>Amount:</b>	<b>162.84</b>	
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 338 0	18 OIL CHG		162.84		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29424</b>	<b>Amount:</b>	<b>206.22</b>	
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 690 0	11 INSP		68.00		N	
01 2750 338 0	11 MAINT.		138.22		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29427</b>	<b>Amount:</b>	<b>232.23</b>	
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 336 0	17 OIL CHG		232.23		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29429</b>	<b>Amount:</b>	<b>145.12</b>	
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 690 0	VAN INSP		68.00		N	
01 2750 338 0	10 VAN MAINT.		77.12		N	
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29456</b>	<b>Amount:</b>	<b>85.50</b>	
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 690 0	08 VAN INSP		68.00		N	
01 2750 338 0	08 VAN FLUIDS		17.50		N	

**Invoice Listing - Detail**  
Unposted

<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29483</b>	<b>Amount:</b>	<b>88.07</b>
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 690 0	07 INSP		88.07		N
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29490</b>	<b>Amount:</b>	<b>257.68</b>
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 690 0	05 INSP		68.00		N
01 2750 338 0	05 OIL CHG		189.68		N
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29496</b>	<b>Amount:</b>	<b>95.48</b>
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 690 0	18 INSP		95.48		N
<b>Vendor ID: NICHREPA</b>	<b>NICHOLS REPAIR</b>	<b>PO Number:</b>	<b>Invoice Number: 29497</b>	<b>Amount:</b>	<b>71.74</b>
Description: AUTO REPAIRS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 690 0	17 INSP		71.74		N
<b>Vendor ID: PLEAIRRI</b>	<b>PLEASANTON IRRIGATION INC</b>	<b>PO Number:</b>	<b>Invoice Number: 74399</b>	<b>Amount:</b>	<b>9.07</b>
Description: SUPPLIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2610 410 0	CLAMPS		9.07		N
<b>Vendor ID: PLEALUNC</b>	<b>PLEASANTON SCHOOL LUNCH</b>	<b>PO Number:</b>	<b>Invoice Number: NOV2017</b>	<b>Amount:</b>	<b>214.00</b>
Description: SNACKS		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 1190 410 0	SNACKS		214.00		N
<b>Vendor ID: POWESCHO</b>	<b>POWERSCHOOL</b>	<b>PO Number:</b>	<b>Invoice Number: 133695</b>	<b>Amount:</b>	<b>624.40</b>
Description: SIS HOSTING		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2210 390 0	28 SIS HOSTING		624.40		N
<b>Vendor ID: PRESXCOMP</b>	<b>PRESTO-X-COMPANY</b>	<b>PO Number:</b>	<b>Invoice Number: 6308440</b>	<b>Amount:</b>	<b>67.00</b>
Description: SERVICES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00

**Invoice Listing - Detail**  
Unposted

Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 319 0	SERVICES		67.00		N	
<b>Vendor ID: THOMPCO</b>	<b>THOMPSON CO., THE</b>	<b>PO Number:</b>	<b>Invoice Number: 1977508</b>	<b>Amount:</b>		<b>364.98</b>
Description: SUPPLIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 410 0	PAPER GOODS		364.98		N	
<b>Vendor ID: TMS</b>	<b>TIME MANAGEMENT SYSTEMS</b>	<b>PO Number:</b>	<b>Invoice Number: 202272</b>	<b>Amount:</b>		<b>62.70</b>
Description: BUSINESS SOFTWARE		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2510 319 0	CONTRACT		62.70		N	
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 144996</b>	<b>Amount:</b>		<b>127.00</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 336 0	bus 18 fuel		127.00		N	
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145035</b>	<b>Amount:</b>		<b>102.17</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 336 0	09 Fuel		102.17		N	
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145137</b>	<b>Amount:</b>		<b>174.00</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 336 0	05 fuel		174.00		N	
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145139</b>	<b>Amount:</b>		<b>22.00</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 338 0	DEF		22.00		N	
<b>Vendor ID: TROTSEV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145161</b>	<b>Amount:</b>		<b>7.90</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 336 0	van oil		7.90		N	

**Invoice Listing - Detail**  
 Unposted

<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145178</b>	<b>Amount:</b>	<b>125.12</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 336 0	09 fuel		125.12		N
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145197</b>	<b>Amount:</b>	<b>137.00</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 336 0	Bus 18 Fuel		137.00		N
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145351</b>	<b>Amount:</b>	<b>133.36</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 336 0	09 Diesel		133.36		N
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145361</b>	<b>Amount:</b>	<b>114.76</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 336 0	18 Fuel		114.76		N
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145474</b>	<b>Amount:</b>	<b>63.00</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 336 0	van gas		63.00		N
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145572</b>	<b>Amount:</b>	<b>120.38</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 336 0	09 Diesel		120.38		N
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145584</b>	<b>Amount:</b>	<b>115.00</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
01 2750 336 0	18 fuel		115.00		N
<b>Vendor ID: TROTSERV</b>	<b>TROTTER SERVICE</b>	<b>PO Number:</b>	<b>Invoice Number: 145618</b>	<b>Amount:</b>	<b>22.00</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	



**Invoice Listing - Detail**  
Unposted

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 336 0	18 DEF		22.00		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 145632</b>		<b>Amount:</b>	<b>55.00</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 336 0	08 Gas		55.00		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 145635</b>		<b>Amount:</b>	<b>56.85</b>
Description: auto fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 336 0	van gas		56.85		N	
<b>Vendor ID: TROTSERV TROTTER SERVICE</b>		<b>PO Number:</b>	<b>Invoice Number: 145792</b>		<b>Amount:</b>	<b>(111.72)</b>
Description: Credits for fuel		Invoice Date: 12/08/2017	Due Date: 12/08/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2750 336 0	Credits		(111.72)		N	
<b>Vendor ID: TWICE TWICE</b>		<b>PO Number:</b>	<b>Invoice Number: 24098</b>		<b>Amount:</b>	<b>40.00</b>
Description: DL ACTIVITIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 3135 410 0	TRADERS IN TIME		40.00		N	
<b>Vendor ID: USBANK US BANK</b>		<b>PO Number:</b>	<b>Invoice Number: ACT2_DEC2017</b>		<b>Amount:</b>	<b>424.10</b>
Description: SUPPLIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 1130 630 0	NMEA		140.00		N	
01 1130 410 0	HOTEL AT CONVENTION		284.10		N	
<b>Vendor ID: USBANK US BANK</b>		<b>PO Number:</b>	<b>Invoice Number: DEC2017</b>		<b>Amount:</b>	<b>2,868.06</b>
Description: SUPPLIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2310 670 0	STATE CONV. ROOMS		2,053.42		N	
01 2310 670 0	MEAL AT SCHOOL BOARD CONVENTION		244.39		N	
01 2510 410 0	ENVELOPES		570.25		N	
<b>Vendor ID: USBANK US BANK</b>		<b>PO Number:</b>	<b>Invoice Number: SPED_DEC2017</b>		<b>Amount:</b>	<b>44.70</b>
Description: SUPPLIES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		

**Invoice Listing - Detail**  
Unposted

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 3200 410 0	DC SNACKS		44.70		N	
<b>Vendor ID: VETTJEFF VETTER, JEFFREY</b>		<b>PO Number:</b>	<b>Invoice Number: DEC2017</b>		<b>Amount:</b>	<b>130.68</b>
Description: MILEAGE		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1 Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2320 670 0	MTG IN LINCOLN		130.68		N	
<b>Vendor ID: WEBELAWN WEBER LAWN SERVICE, INC</b>		<b>PO Number:</b>	<b>Invoice Number: 4409</b>		<b>Amount:</b>	<b>691.81</b>
Description: SERVICES		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1 Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 319 0	OCT MOWING/4TH APP		691.81		N	
<b>Vendor ID: YANDMUSI YANDA'S MUSIC</b>		<b>PO Number:</b>	<b>Invoice Number: 331528</b>		<b>Amount:</b>	<b>95.90</b>
Description:		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1 Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 1130 410 0	cables		95.90		N	
<b>Vendor ID: YANDMUSI YANDA'S MUSIC</b>		<b>PO Number:</b>	<b>Invoice Number: 331530</b>		<b>Amount:</b>	<b>75.00</b>
Description: MUSIC		Invoice Date: 12/07/2017	Due Date: 12/07/2017	Status: A	1099 Amount: 0.00	
Sequence: 1 Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 1130 410 0	service		75.00		N	
			Batch 1099 Total:	1,290.00		Batch Total: 33,966.34
Batch Description: MONTHLY INVOICES		Processing Month: 12/2017				
<b>Vendor ID: BLACHILL BLACK HILLS ENERGY</b>		<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount:</b>	<b>2,378.00</b>
Description: NAT. GAS		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 0.00	
Sequence: 1 Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 321 0	NAT. GAS		2,378.00	0.00	N	
<b>Vendor ID: CHARCOMM CHARTER COMMUNICATIONS</b>		<b>PO Number:</b>	<b>Invoice Number: Monthly</b>		<b>Amount:</b>	<b>214.96</b>
Description: INTERNET		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 0.00	
Sequence: 1 Check Type:		Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2510 382 0	INTERNET		214.96	0.00	N	
<b>Vendor ID: DASCENT DAS STATE ACCOUNTING-CENTRAL FINANCE</b>		<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount:</b>	<b>234.93</b>
Description: NETWORK		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 0.00	
Sequence: 1 Check Type:		Checking Account ID:	Check Number:	Check Date:		

**Invoice Listing - Detail**  
Unposted

<u>Chart of Account Number</u> 01 1100 382 0	<u>Detail Description</u> NETWORK	<u>Cost Center ID</u>	<u>Detail Amount</u> 234.93	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>
<b>Vendor ID: DAUELMINI</b>	<b>DAUEL MINI-STORAGE</b>	<b>PO Number:</b>	<b>Invoice Number: Monthly</b>		<b>Amount:</b>	<b>38.00</b>
Description: STORAGE		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u> 01 2610 410 0	<u>Detail Description</u> STORAGE	<u>Cost Center ID</u>	<u>Detail Amount</u> 38.00	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>
<b>Vendor ID: DCPD</b>	<b>DCPPD</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount:</b>	<b>4,419.11</b>
Description: ELECTRICITY		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u> 01 2610 322 0	<u>Detail Description</u> ELECTRICITY	<u>Cost Center ID</u>	<u>Detail Amount</u> 4,320.68	<u>1099 Detail Amount</u> 0.00	<u>Asset/Asset Tag</u> N	<u>In Full</u>
01 2610 321 0	ballfield		28.00	0.00	N	
01 2610 321 0	concessions		30.03	0.00	N	
01 2610 321 0	park lot		40.40		N	
<b>Vendor ID: FRONTIER</b>	<b>FRONTIER</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount:</b>	<b>269.14</b>
Description: TELEPHONE		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u> 01 2510 382 0	<u>Detail Description</u> PHONE	<u>Cost Center ID</u>	<u>Detail Amount</u> 269.14	<u>1099 Detail Amount</u> 0.00	<u>Asset/Asset Tag</u> N	<u>In Full</u>
<b>Vendor ID: HOMELEAS</b>	<b>HOMETOWN LEASING</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount:</b>	<b>519.97</b>
Description: COPIER LEASE		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u> 01 1100 318 0	<u>Detail Description</u> LEASE	<u>Cost Center ID</u>	<u>Detail Amount</u> 519.97	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>
<b>Vendor ID: HUNTCLEA</b>	<b>HUNTER CLEANING SERVICE, INC</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount:</b>	<b>7,600.00</b>
Description: CLEANING SERVICE		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u> 01 2610 319 0	<u>Detail Description</u> CLEANING	<u>Cost Center ID</u>	<u>Detail Amount</u> 7,600.00	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u> N	<u>In Full</u>
<b>Vendor ID: RAVESANI</b>	<b>RAVENNA SANITATION</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount:</b>	<b>213.50</b>
Description: GARBAGE		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 213.50	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u> 01 2610 690 0	<u>Detail Description</u> GARBAGE	<u>Cost Center ID</u>	<u>Detail Amount</u> 213.50	<u>1099 Detail Amount</u> 213.50	<u>Asset/Asset Tag</u> N	<u>In Full</u>
<b>Vendor ID: VILLAPLEAS</b>	<b>VILLAGE OF PLEASANTON</b>	<b>PO Number:</b>	<b>Invoice Number: MONTHLY</b>		<b>Amount:</b>	<b>457.00</b>
Description: WATER		Invoice Date: 12/21/2017	Due Date: 12/21/2017	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		

**Invoice Listing - Detail**

Unposted

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
01 2610 323 0	WATER school		457.00	0.00	N	
01 2510 382 0	Water Conc		0.00	0.00	N	
01 2510 382 0	Water Field		0.00	0.00	N	
		Batch 1099 Total:	<hr/>	213.50		Batch Total: <hr/>
		Report 1099 Total:	<hr/>	1,503.50		Report Total: <hr/>